


## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

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<b>Title of Invention</b>	UTILITY KNIFE				
First Named Applicant :	Robert E. Scarla				
Attorney Docket Number :	42994.0217				
<p>I hereby appoint the registered practitioner(s) at Customer Number:</p> <p>20322</p> 					
<p>as attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.</p> <p>I am the Applicant/Inventor.</p> <p>Full Name of Applicant of Record:</p> <table border="1"><tr><td colspan="2">Robert E. Scarla</td></tr><tr><td>Signature: /RES</td><td>Date: 2002-01-22</td></tr></table>		Robert E. Scarla		Signature: /RES	Date: 2002-01-22
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